

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

NATIONAL ASSOCIATION OF WHOLESALE-DEALERS POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

1325 G Street, N.W. Suite 1000

☐ Check if different than previously reported. (ACC)

WASHINGTON

DC

20005-3134

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00109306

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Beth Rivera Cruz, Assistant Treasurer

Signature of Treasurer

Beth Rivera Cruz, Assistant Treasurer

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 14 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL ASSOCIATION OF WHOLESALE-DEBITORS POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">13543.87</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">61543.87</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">59700.00</span>	<span style="border: 1px solid black; padding: 2px;">130700.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">121243.87</span>	<span style="border: 1px solid black; padding: 2px;">144243.87</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">26500.00</span>	<span style="border: 1px solid black; padding: 2px;">49500.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">94743.87</span>	<span style="border: 1px solid black; padding: 2px;">94743.87</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NATIONAL ASSOCIATION OF WHOLESALE-DESTRUCTORS POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2015

To:

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2015

**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

44700.00

110700.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

44700.00

110700.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

10000.00

15000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

54700.00

125700.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

5000.00

5000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

59700.00

130700.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

59700.00

130700.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26500.00	49500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26500.00	49500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26500.00	49500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	54700.00	125700.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	54700.00	125700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Cullen Andrews**

Mailing Address One Dot Way

City	State	Zip Code
Mount Sterling	IL	62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Vice President-National Accounts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : SA11AI.7369

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Brad Blevins**

Mailing Address 421 Hart Lane-PO Box 160387

City	State	Zip Code
Nashville	TN	37216-0387

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Blevins Inc

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2015

Transaction ID : SA11AI.7378

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Todd A. Bricker**

Mailing Address One Dot Way

City	State	Zip Code
Mount Sterling	IL	62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Director of Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2015

Transaction ID : SA11AI.7356

Amount of Each Receipt this Period

350.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2850.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL ASSOCIATION OF WHOLESALE-RETAILERS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Jean Buckley

Mailing Address One Dot Way

City State Zip Code  
 Mount Sterling IL 62353

FEC ID number of contributing federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

President-Tracy Family Foundation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2015

Transaction ID : SA11AI.7360

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. John Burkemper

Mailing Address 1585 Fencorp Drive

City State Zip Code  
 Fenton MO 63026

FEC ID number of contributing federal political committee.

C

Name of Employer

Grimco Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2015

Transaction ID : SA11AI.7376

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Peter Edelstein

Mailing Address 26403 Groesbeck Hwy

City State Zip Code  
 Warren MI 48089

FEC ID number of contributing federal political committee.

C

Name of Employer

Laird Plastics

Occupation

Executive VP-Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

Transaction ID : SA11AI.7386

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ▶

1250.00

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. George Eversman**

Mailing Address One Dot Way

City State Zip Code  
 Mount Sterling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

EVP of Retail & Bus Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2015

Transaction ID : SA11AI.7373

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Jeffrey L. Grever**

Mailing Address One Dot Way

City State Zip Code  
 Mount Sterling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Director-Corporate Accounts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2015

Transaction ID : SA11AI.7371

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Jeff Hamar**

Mailing Address 9303 Greenleaf Ave.

City State Zip Code  
 Santa Fe Springs CA 90670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Galleher Corp

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2015

Transaction ID : SA11AI.7375

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3350.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Matthew D. Holt**

Mailing Address 17050 Baxter Road

City State Zip Code  
 Chesterfield MO 63005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Vice President-Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

11 / 03 / 2015

Transaction ID : SA11AI.7362

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Suzy Kassing**

Mailing Address One Dot Way

City State Zip Code  
 Mount Sterling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Director of Personnel, ILWH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

10 / 27 / 2015

Transaction ID : SA11AI.7403

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Patrick L. Larmon**

Mailing Address One City Place Drive, Suite 200

City State Zip Code  
 St. Louis MO 63141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bunzl Distribution

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

10 / 20 / 2015

Transaction ID : SA11AI.7402

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. John Long**

Mailing Address 17050 Baxer Road # 130

City State Zip Code  
 Chesterfield MO 63005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Senior Vice President-Warehousing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 30 / 2015

**Transaction ID : SA11AI.7354**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. John Lyday**

Mailing Address One City Place Drive, Suite 200

City State Zip Code  
 St. Louis MO 63141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bunzl Distribution

Occupation

SR VP-HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 18 / 2015

**Transaction ID : SA11AI.7381**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Joseph Nettemeyer**

Mailing Address 1941 Ringwood Avenue

City State Zip Code  
 San Jose CA 95131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VAlin Corp

Occupation

Pres/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 09 / 2015

**Transaction ID : SA11AI.7401**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Kelly O'Donnell**

Mailing Address 17050 Baxter Road #130

City State Zip Code  
 Chesterfield MO 63005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Vice President-Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 05 / 2015

**Transaction ID : SA11AI.7366**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Mr. William A. Parsley**

Mailing Address 3750 N Liberty St

City State Zip Code  
 Winston Salem NC 27105-3909

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carswell Distributing Co

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

12 / 18 / 2015

**Transaction ID : SA11AI.7382**

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Manuel Perez de la Mesa**

Mailing Address 109 Northpark Blvd

City State Zip Code  
 Covington LA 70433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pool corp

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 14 / 2015

**Transaction ID : SA11AI.7348**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

4250.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Manuel Perez de la Mesa**

Mailing Address 109 Northpark Blvd

City State Zip Code  
Covington LA 70433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Pool corp

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

11 / 05 / 2015

**Transaction ID : SA11AI.7368**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Joseph S. Poehling**

Mailing Address 6800 Gisholt Drive

City State Zip Code  
Madison WI 53713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

First Supply LLC

President & Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

12 / 18 / 2015

**Transaction ID : SA11AI.7383**

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**C. Mr. W. Grady Rosier**

Mailing Address 4747 McLane Pkwy

City State Zip Code  
Temple TX 76504-6115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

McLane Co Inc

President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / 10 / 2015

**Transaction ID : SA11AI.7377**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 23

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Fred Schmidt III**

Mailing Address One Dot Way

City State Zip Code  
Mount Sterling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Employee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : SA11AI.7358**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. Scott Stamerjohn**

Mailing Address One Dot Way

City State Zip Code  
Mount Serling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 03 / 2015

**Transaction ID : SA11AI.7350**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **c. Mary Sullivan**

Mailing Address One Dot Way

City State Zip Code  
Mount Sterling IL 52353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Shareholder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 30 / 2015

**Transaction ID : SA11AI.7407**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. James W. Tracy**

Mailing Address One Dot Way

City State Zip Code  
 Mount Sterling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Sr. Vice President & Legal Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 03 / 2015

**Transaction ID : SA11AI.7364**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Mr. John Tracy**

Mailing Address 17050 Baxter Road #250

City State Zip Code  
 Chesterfield MO 63005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

09 / 30 / 2015

**Transaction ID : SA11AI.7349**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Joseph Tracy**

Mailing Address One Dot Way

City State Zip Code  
 Mount Sterling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

President/COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

11 / 11 / 2015

**Transaction ID : SA11AI.7352**

Amount of Each Receipt this Period

3000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Thomas L. Tracy**

Mailing Address One Dot Way

City State Zip Code  
 Mount Sterling IL 62353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dot Foods Inc.

Occupation

Staff Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : SA11AI.7405**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Mr. Raymon A. York**

Mailing Address 3441 E Harbour Dr

City State Zip Code  
 Phoenix AZ 85034-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ewing Irrigation Products

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : SA11AI.7379**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Ms. Sue York**

Mailing Address 3441 E Harbour Dr

City State Zip Code  
 Phoenix AZ 85034-7229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ewing Irrigation Products

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : SA11AI.7380**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

10500.00

**TOTAL** This Period (last page this line number only)..... ►

44700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 23  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. MAC-PAC-USA**

Mailing Address 4747 McLane Parkway

City State Zip Code  
 Temple TX 76504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 28 2015

**Transaction ID : SA11C.7385**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. MCKESSON CORPORATION EMPLOYEES POLITICAL FUND**

Mailing Address ONE POST STREET  
 34TH FLOOR

City State Zip Code  
 SAN FRANCISCO CA 94104

FEC ID number of contributing  
federal political committee.

C C00108035

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 10 07 2015

**Transaction ID : SA11C.7400**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10000.00

10000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 23  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. MARCO RUBIO FOR PRESIDENT**

Mailing Address PO BOX 558701

City State Zip Code  
 MIAMI FL 33255

FEC ID number of contributing  
federal political committee.

**C** C00458844

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07 / 13 / 2015**

**Transaction ID : SA16.7344**

Amount of Each Receipt this Period

5000.00

Original Contrib to Senate Campaign made 9/17/13

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**/ /**

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**/ /**

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00

	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE

### A. CARLOS CURBELO CONGRESS

Mailing Address 8724 SW 72ND ST

City	State	Zip Code
MIAMI	FL	33173

Purpose of Disbursement
Political Contribution

Candidate Name

CARLOS CURBELO

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State: FL	District: 26	

Disbursement For: 2016

☐ Primary ☒ General

☐ Other (specify) ▼

Date of Disbursement

Three digital displays showing the date 10/29/2015 in MM/DD/YYYY format. The first display shows '10' with 'M' indicators above it. The second display shows '29' with 'D' indicators above it. The third display shows '2015' with 'Y' indicators above it.

Transaction ID : SB23.7318

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CHARLES BOUSTANY JR MD FOR SENATE INC**

Mailing Address PO BOX 80126

City	State	Zip Code
LAFAYETTE	LA	70598

Purpose of Disbursement	Political Contribution

Candidate Name

CHARLES W JR DR BOUSTANY

Office Sought:	<input type="checkbox"/>	House
	<input checked="" type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State: LA	District: 00	

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB23.7338

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

### C. COFFMAN FOR CONGRESS 2016

Mailing Address 4950 S YOSEMITE STREET F2 #511

City	State	Zip Code
GREENWOOD VILLAGE	CO	80111

Purpose of Disbursement	Political Contribution

Candidate Name

MIKE COFFMAN

Office Sought: ☒ House  
☐ Senate  
☐ President  
 State: CO District: 07

Disbursement For: 2016

☐ Primary ☒ General

☐ Other (specify) ▼

Date of Disbursement



Transaction ID : SB23.7292

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMSTOCK FOR CONGRESS**

Mailing Address PO BOX 831

City	State	Zip Code
MC LEAN	VA	22101

Purpose of Disbursement  
Political Contribution

Candidate Name

**BARBARA J HONORABLE COMSTOCK**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		10		2015

**Transaction ID : SB23.7306**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. COMSTOCK FOR CONGRESS**

Mailing Address PO BOX 831

City	State	Zip Code
MC LEAN	VA	22101

Purpose of Disbursement  
Political Contribution

Candidate Name

**BARBARA J HONORABLE COMSTOCK**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		18		2015

**Transaction ID : SB23.7331**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. DOLD FOR CONGRESS**

Mailing Address PO BOX 6312

City	State	Zip Code
LIBERTYVILLE	IL	60048

Purpose of Disbursement  
Political Contribution

Candidate Name

**ROBERT JAMES JR DOLD**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		23		2015

**Transaction ID : SB23.7295**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ELISE FOR CONGRESS**

Mailing Address PO BOX 500

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement  
Political Contribution

Candidate Name

**ELISE M. STEFANIK**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2015

**Transaction ID : SB23.7309**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. ELISE FOR CONGRESS**

Mailing Address PO BOX 500

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement  
Political Contribution

Candidate Name

**ELISE M. STEFANIK**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2015

**Transaction ID : SB23.7321**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. FASO FOR CONGRESS**

Mailing Address PO BOX 448

City	State	Zip Code
KINDERHOOK	NY	12106

Purpose of Disbursement  
Political Contribution

Candidate Name

**JOHN J. MR. FASO**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2015

**Transaction ID : SB23.7312**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►

3000.00
---------

**TOTAL** This Period (last page this line number only)..... ►

--

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMITTEE

Category/  
Type☒ Primary ☐ General  
☐ Other (specify) ▼

2500.00

Category/  
Type☒ Primary ☐ General  
☐ Other (specify) ▼

The image shows three 10-pin DIP packages. The first package is labeled 'M11' and has 'M' and '11' printed on it. The second package is labeled 'D11' and has 'D' and '11' printed on it. The third package is labeled 'Y2015' and has 'Y' and '2015' printed on it.

Category/  
Type☒ Primary ☐ General  
☐ Other (specify) ▼

4500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALE-DEVELOPERS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RECLAIM AMERICA PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2015

Mailing Address 228 S WASHINGTON ST STE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

**Transaction ID : SB23.7303**Purpose of Disbursement  
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. RICHARD HANNA FOR CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2015

Mailing Address PO BOX 118

City	State	Zip Code
UTICA	NY	13503

**Transaction ID : SB23.7335**Purpose of Disbursement  
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1000.00

**RICHARD L. HANNA**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 22

Full Name (Last, First, Middle Initial)

**C. WALBERG FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		26		2015

Mailing Address PO BOX 1362

City	State	Zip Code
JACKSON	MI	49204

**Transaction ID : SB23.7315**Purpose of Disbursement  
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1000.00

**TIMOTHY L HON. WALBERG**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 07

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7000.00
---------

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 23

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF WHOLESALE-DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ZELDIN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2015

Mailing Address 47 FLINTLOCK DRIVE

City	State	Zip Code
SHIRLEY	NY	11967

**Transaction ID : SB23.7328**Purpose of Disbursement  
Political Contribution

Amount of Each Disbursement this Period

Candidate Name

**LEE M ZELDIN**Category/  
Type

1000.00
---------

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 01

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

--

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00
26500.00